FICATE OF TRANSMISSION/MAILING

Art Unit 2829

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at (703) 872-9306 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450,

N. Kenneth Burraston					
Docket Number (Optional)					
Filed March 31, 2004					
nent With Contact Blade					

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

**Small Entity Fee** 

960

The requested extension and fee are as follows (check time period desired and enter the appropriate for below):

<u>Fee</u>

<b>⊠</b> O₁	ne month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>	
□ Tv	wo month (37 CFR 1.17(a)(2))	\$450	\$225	\$	
Tì	hree month (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
☐ Fo	our month (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
☐ Fi	ve month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.					
A check that includes the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.					
☐ The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>500843</u> .					
	: Information on this form may becaution and authorization on PTO-20		rd information should no	t be included on this form. Provide credit	
I am the	applicant/inventor				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)					
attorney or agent under 37 CFR 1.34. Registration Number 39,923					
	1 0 1			June 17, 2005	
1				Date	

(801) 323-5934

to

Ref. No.: 12439-0167

Examiner Ernest F. Karlsen

\$ 120.00

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

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